New Jersey Public Employment Relations Commission POLICE AND FIRE

COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #			
	SECTION I: Parties and Term of Contracts		
1	Public Employer: City of Absecon	County: Atlantic	
2	Employee Organization: PBA Local #77	Number of Employees in Unit: 24	
3	Base Year Contract Term: 1/1/2012 - 12/31/2015		
4	New Contract Term: 1/1/2016 - 12/31/2019		
	SECTION II: Type of Contract Settlement (please	check only one)	
5	Contract settled without neutral assistance		
6	Contract settled with assistance of mediator		
7	Contract settled with assistance of fact-finder		
8	Contract settled in Interest Arbitration		
9	If contract was settled in Interest Arbitration, did the Arbit	rator issue an Award? Yes No	
· · · · · · · · · · · · · · · · · · ·	SECTION III: Base Salary Calculation		
	The "base year" refers to the final year of the expiring or ex	xpired agreement.	
10	Salary Costs in base year	\$ 1722556	
11	Longevity Costs in base year	\$ 26698	
12	Other base year salary costs		
	\$		
	\$		
	\$		
	Ś		
	Sum of "Other" Costs Listed in Line 12.	\$ 0	
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	s 1749254	

SECTION IV: Increase in Base Salary Cost (for each year of New CNA)	Emp	loyer: City of Absecon		Emplo	yee Organizati	on: PBA Loca	l #77	Pi	age 2
15 Effective Date (month/day/year) 16 Cost of Salary Increments (S) 17 Salary Increase Above Increments (\$) 18 Longevity Increase (\$) 19 Total Increased Cost for "Other" Items (\$) 20 Total Increase (\$) SECTION V: Average Increase Over Term of New CNA 21 Dollar Increase Over Life of Contract \$\frac{301806}{301806}\$ [Take sum of all amounts listed on Line 20 Percentage Increase Over Life of Contract \frac{17}{4}\$ (Divide percentage on Line 22 by number 22 by number 22 by number 23 Average Percentage Increase Per Year 4 [Divide percentage on Line 22 by number 25]	L4			ry Cost (for e	each year of N				
(month/day/year) 16 Cost of Salary Increments (\$) 17 Salary Increase Above Increments (\$) 18 Longevity Increase (\$) 19 Total Increased Cost for "Other" Items (\$) 20 Total Increase (\$) SECTION V: Average Increase Over Term of New CNA 21 Dollar Increase Over Life of Contract \$\frac{301806}{17}\$ [Take sum of all amounts listed on Line 20] 22 Percentage Increase Over Life of Contract \$\frac{17}{2}\$ % [Divide percentage on Line 22 by number]		Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	
(\$) 17 Salary Increase Above Increments (\$) 18 Longevity Increase (\$) 19 Total Increased Cost for "Other" Items (\$) 20 Total Increase (\$) SECTION V: Average Increase Over Term of New CNA 21 Dollar Increase Over Life of Contract \$\frac{301806}{17}\$ [Take sum of all amounts listed on Line 20] 22 Percentage Increase Over Life of Contract \$\frac{17}{4}\$ [Divide percentage on Line 22 by number]	15		1/1/16	1/1/17	1/1/18	1/1/19			
Increments (\$) 18 Longevity Increase (\$) 6863 640 594 1952 19 Total Increased Cost for "Other" Items (\$) 20 Total Increase (\$) (sum of lines 16-19) SECTION V: Average Increase Over Term of New CNA 21 Dollar Increase Over Life of Contract 22 Percentage Increase Over Life of Contract 23 Average Percentage Increase Per Year [Take sum of all amounts listed on Line 20 to provide amount on Line 21 by amount on the contract of the contra	16								
19 Total Increased Cost for "Other" Items (\$) 20 Total Increase (\$) (sum of lines 16-19) SECTION V: Average Increase Over Term of New CNA 21 Dollar Increase Over Life of Contract \$\frac{301806}{17}\$ (Take sum of all amounts listed on Line 20) 22 Percentage Increase Over Life of Contract Average Percentage Increase Per Year (Divide percentage on Line 22 by number)	17	-	63385	83479	67751	81046			
"Other" Items (\$) Total Increase (\$)	18	Longevity Increase (\$)	6863	640	594	1952			
(sum of lines 16-19) SECTION V: Average Increase Over Term of New CNA Dollar Increase Over Life of Contract Percentage Increase Over Life of Contract Over L	19								
Dollar Increase Over Life of Contract \$\frac{301806}{17}\$ [Take sum of all amounts listed on Line 20] Percentage Increase Over Life of Contract 17 % [Divide amount on Line 21 by amount on Line 22] Average Percentage Increase Per Year 4 % [Divide percentage on Line 22 by number 17 % [Divide percentage on Line 22]	20	• • •	70248	84119	68345	79094			<u> </u>
Percentage Increase Over Life of Contract 17		SECTION V: Average I	ncrease Ove	r Term of Ne	w CNA	, company of the sead Cartalan and			
23 Average Percentage Increase Per Year 4 [Divide percentage on Line 22 by number	1				 (Take su	ım of all amou	nts listed on Li	ne 20 above]
25 Average reflectively increase reflection 22 by number	22	Percentage Increase Ove	r Life of Cont		% [Divide	amount on Lin	e 21 by amour	nt on Line 14]
the contract]	23	Average Percentage Incre	ease Per Year	4		_	Line 22 by nu	mber of year	s of

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City of Absecon	DRA Local #77	
mployer: City of Absecon	Employee Organization: PBA Local #77	Page 3

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

					←ın	creases->		
24	ltem Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	Uniform	27600	27600	27600	27600	27600		
	Education	24800	24800	24800	24800	24800		
		·						
25	Totals (\$):							

SECTION VII: Medical Costs

	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 368726	\$ 380383
27	Prescription Plan Cost	ş	\$
28	Dental Plan Cost	\$	\$
29	Vision Plan Cost	\$	\$
30	Total Cost of Insurance	\$ 368726	\$ 380383

Page 3 of 4 (complete all pages)

Empl	oyer: City of Abescon	Employee Organization: PBA Local #77 Page 4					
SECT	ION VII: Medical Costs (continued)						
31	Employee Insurance Contributions	\$ 112823 \$ 113761					
32	Contributions as % of Total Insurance Co	ost 31 % 30 %					
33	Identify any insurance changes that w	vere included in this CNA.					
34	SECTION VIII: Certification and Signature The undersigned certifies that the foregoing figures are true:						
	Print Name: Jessica Thompson Position/Title: City Administrator/CFO						
	Signature: (10/4/17)	hompson					
	Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us						
	NJ Public Employment Relations Com	nmission					
	Conciliation and Arbitration						
	PO Box 429						

Trenton, NJ 08625

Phone: 609-292-9898

Revised 8/2016